PATENT	APPII	CATION	FFF	DETERMI	NATION	RECORD
FAILNI	AFFLI	CALICIA			ITALION	RECURD

Effective October 1, 2001

Application or Docket Number

10010471

CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS		20				ſ	RATE	FEE	i	RATE	FEE	
FOR		NUMBER FILED		NUMB	NUMBER EXTRA		BASIC FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS		21) minus 20= *		* E	0		X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			1 minus 3 = *				ľ	X42=		OR	X84=	
MU	ILTIPLE DEPEN	RESENT		+ <u>-</u>			.140					
* If the difference in column 1 is less than zero, enter "0" in column 2							+140=		OR	+280=	71/4	
CLAIMS AS AMENDED - PART II							TOTAL		OR	TOTAL OTHER	TUAN	
		(Column 1)	114111111111111111111111111111111111111	(Colu	mn 2)	(Column 3)	_	SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	· 25	Minus	** 0	25	= 5	1	X\$ 9=		OR	X\$18≈	90
AME	Independent	* Z	Minus	*** 3		-0	Ì	X42=		OR	X84=	1
	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	SENDEN.	T CLAIM		Ì	+140=			+280=	
							l	TOTAL		OR OR	TOTAL	al.
		(Column 1)		(Colu	ımn 2)	(Column 3)	A	ADDIT. FEE		Uħ	ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	ì	HIGH NUM PREVI	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	* 39	Minus	** 0	25	= 14		X\$ 9=		OR	X\$18=	25280
AME	Independent	* #	Minus	***(<u> </u>	=		X42=		OR	X84=	14.00
	FIRST PRESE	NIATION OF WI	JLIIPLE DEF	PNUEN	I CLAIIVI			+140=		OR	+280=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	Var
		(Column 1)			ımn 2)	(Column 3)				•	/	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NO N	Total	* 3P	Minus	** (39,	= 0		X\$ 9=		OR	X\$18=	
AME	Independent	* 7	Minus	***	4	3		X42=		OR	XXXX	24
上	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	IT CLAIM		╽┟					
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								OR	+280= TOTAL	1000		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										Kala		